

**MULTIPLE DEPENDENT CLAIM
- FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-475)**

SERIAL NO. **10641725** FILING DATE **8-15-03**
APPLICANT

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	3	↓	3	↓		↓
TOTAL DEP.	11	←	11	←		←
TOTAL CLAIMS	14		14			

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

BEST AVAILABLE COPY